

Vaccination Appointment Guide

Updated
March 3, 2021



Vaccination Appointment Guide

The District of Columbia Department of Health (DC Health) continues to make progress with our COVID-19 vaccine distribution planning. We are working with the federal government and local partners within the District to plan for the distribution of the COVID-19 vaccine as doses become available.

To receive the vaccine, you must register for an appointment. Please use this guide to help you through the process of registering for an appointment online.

Before You Start:

Before beginning registration, visit vaccinate.dc.gov to confirm you are in the current priority group.

You will be asked for your email to receive your appointment confirmation. Prior to registering, make sure to have an email that you have access to.

If you are unable to access the online vaccine portal or do not have internet access, please call the District's call center at **855-363-0333** for assistance with vaccine registration.

(Suggestion: Put phone number on every page, in footer)

How to register for a vaccination appointment online

1. From vaccinate.dc.gov, click **Proceed to Vaccination Registration Portal** to start.

(Need updated screenshot of what this will be)

Home Phase Two Testing Vaccine DC CAN Recovery Food Utilities Data Operating Status Health Guidance News

Listen

Vaccination Registration

GOVERNMENT OF THE DISTRICT OF COLUMBIA
MURIEL BOWSER, MAYOR

Thank you for your interest in registering with our vaccination portal. At this moment, vaccination appointments are only available for workers in health care settings and District residents 65 years of age and older. To schedule an appointment, please read the information below and then proceed to the required questionnaire. For assistance call the District's call center at 855-363-0333, Monday through Friday from 8 am to 7pm and Saturday from 8 am to 4 pm.

If you do not work in a health care setting or not a District residents 65 years of age and older, [submit your email address or mobile phone #](#) and you will receive an email or text message when the registry opens to additional populations.

Thank you again. Together, we will save lives and end this pandemic.

If you work for any of the below listed institutions, please exit this questionnaire and contact your facility for specific instructions on how to get vaccinated.

- DC Health
- DC Fire and EMS
- HSC Pediatric Center
- Howard University Hospital
- MedStar Georgetown University Hospital
- Medstar Washington Hospital Center
- Psychiatric Institute of Washington
- St. Elizabeths Hospital
- The George Washington University Hospital
- United Medical Center
- Children's National Hospital
- Kaiser Permanente
- National Rehabilitation Hospital
- Sibley Memorial Hospital
- Unity Healthcare
- Community of Hope
- Mary's Center
- Giant Pharmacy
- Bread for the City
- Safeway Pharmacy

Schedule an Appointment

Please Note: This system is currently open only for people working in health care settings. You MUST provide verification of your eligibility at the time of your vaccination.

[Proceed to Vaccination Registration Portal](#)



Note: For the best experience, please use a modern web browser such as **Chrome, Safari, Edge, or Firefox**. Internet Explorer will not work. Your computer should also be using the following operating system: Windows 7, 8.1, 10 and later and iOS Leopard and later (Version 11).

2. You are now on the **COVID-19 Appointment Portal**. Review and gather the information needed to make an appointment.

When you are ready, click **Take Questionnaire**.

DC HEALTH
GOVERNMENT OF THE DISTRICT OF COLUMBIA

HOME | Vaccine Centers | Sign in

GOVERNMENT OF THE DISTRICT OF COLUMBIA
DC MURIEL BOWSER, MAYOR

COVID-19 Vaccination Appointment

To schedule an appointment, please fill in the required questionnaire so that we can gather information regarding your readiness for COVID-19 vaccination, and offer guidance and instruction to ensure your safety. You will need to provide the following details:

- Demographic details**
Such as race, ethnicity, gender, age
- Medical history**
Current/past ailments and allergy information
- COVID-19 history**
History of any COVID-19 infections, testing or vaccinations
- Contact information**
Your contact details

[Take Questionnaire](#)

3. **Begin by answering the first two questions.** Click the arrow (▼) on the right-hand side of the box. You will see three choices to determine your eligibility. Pick the one that is true for you.

The screenshot shows the DC Health website header with the logo and a 'Sign in' link. Below the header, a message states: 'This questionnaire is designed to gather information regarding your readiness for COVID-19 vaccination, and offer guidance and instruction to ensure your safety.' A reminder note follows: 'Reminder: Only residents living in select zip codes are able to schedule vaccine appointments at this time.' The first question is 'Are you a District Resident or Work in the District of Columbia? *'. The dropdown menu is open, showing 'District Resident' as the selected option. The second question is 'Please select your Postal Code *'. The dropdown menu is open, showing '20001' as the selected option.

DC HEALTH
GOVERNMENT OF THE DISTRICT OF COLUMBIA

Sign in

This questionnaire is designed to gather information regarding your readiness for COVID-19 vaccination, and offer guidance and instruction to ensure your safety.

Reminder: Only residents living in select zip codes are able to schedule vaccine appointments at this time.

Are you a District Resident or Work in the District of Columbia? *

District Resident

Please select your Postal Code *

20001

4. **Once you have been qualified, continue with the questions.** Click the arrow (▼) on the right-hand side of each box. You will see several choices. Pick the one that is true for you.


Please complete all the questions that have a red **asterisk***.

The screenshot shows the DC Health website interface for a COVID-19 vaccination questionnaire. At the top, the DC Health logo is on the left and a 'Sign in' link is on the right. The main content area has a light blue header with the text: 'This questionnaire is designed to gather information regarding your readiness for COVID-19 vaccination, and offer guidance and instruction to ensure your safety.' Below this is a reminder: 'Reminder: Only residents living in select zip codes are able to schedule vaccine appointments at this time.' The first question is 'Are you a District Resident or Work in the District of Columbia? *' with a dropdown menu showing 'District Resident'. The next section is 'Work-related Information' with two questions: 'Do you work in one of the following settings? *' and 'Are you required to report in to work in Person? *', both with dropdown menus. A note follows: 'If you selected any of the above work settings, you must bring verification to your appointment (work ID badge, letter from your employer, copy of provider license, pay stub or other means of verification).' The final section is 'Additional Information' with two questions: 'Preferred Language *' (dropdown showing 'English') and 'Preferred Vaccine Type *' (dropdown showing 'No Preference').

Note: For District of Columbia residents aged 65 and older, you do not need to bring a work ID badge, letter from your employer, or a pay stub to your appointment. This is a note meant for health care workers part of phase 1a.

5. On the next page:

- For the first question, if you have not gotten sick before when you had a vaccine, answer **No** for the first question.
- For the second question, if the doctor has not told you to stay home or away from other people because you have COVID-19 or another sickness, answer **No**. If the doctor has told you to stay home or away from other people because you have COVID-19 or another sickness, answer **Yes**.
- For the third question, if this is the first time you have had a COVID-19 vaccination, answer **Yes**. If this is not the first time you have had a COVID-19 vaccination, answer **No**.



GOVERNMENT OF THE DISTRICT OF COLUMBIA

Medical Information

Have you had any severe reaction to a vaccine before?

☒ No ☐ Yes

Are you under isolation or quarantine for COVID-19 at this moment?

☒ No ☐ Yes

Will this be your first COVID-19 vaccine dose?

☐ No ☒ Yes

6. On the next page, view the list of medical conditions. If you see your condition on the list, select **Yes**. Click **Next** to continue.

DC

HEALTH

GOVERNMENT OF THE DISTRICT OF COLUMBIA

Have you been diagnosed with one of the following medical conditions by your healthcare provider? *

- Asthma
- Chronic Obstructive Pulmonary Disease (COPD), and other Chronic Lung Disease
- Bone Marrow and Solid Organ Transplantation
- Cancer
- Cerebrovascular Disease
- Chronic Kidney Disease
- Congenital Heart Disease
- Diabetes Mellitus
- Heart Conditions, such as Heart Failure, Coronary Artery Disease, or Cardiomyopathies
- HIV
- Hypertension
- Immunocompromised State
- Inherited Metabolic Disorders
- Intellectual and Developmental Disabilities
- Liver Disease
- Neurologic Conditions
- Obesity, BMI \geq 30 kg/m²
- Pregnancy
- Severe Genetic Disorders
- Sickle Cell Disease
- Thalassemia

Please note, vaccinate.dc.gov only schedules the first dose of your COVID-19 vaccine. You must [contact the provider](#) who administered your first vaccine to schedule your second dose.


Next

7. On the next page, start typing your address in the **Address Search & Select** field. As you type, a drop-down list will appear with matching addresses based on your input to let you auto-fill your full address. You must select from the drop-down list to select your address instead of manually typing it in the rest of the address fields.



The screenshot shows a web form for address search. At the top is the DC HEALTH logo with the text 'GOVERNMENT OF THE DISTRICT OF COLUMBIA' below it. Below the logo is a heading 'Search for your address or enter it manually.' followed by a sub-label 'Address Search & Select (just start typing your address)' and a text input field. Below this is 'Address Line 1 *' with a text input field. Next is 'Apartment, Suite, Unit Number' with a text input field. Then 'City *' with a text input field. Then 'State/Province *' with a dropdown menu. Finally, 'Postal Code *' with a text input field.

8. On the next page, enter your personal details such as name, email address, phone number, etc. All the fields marked with red asterisk (*) are required. After filling in the information, click **Next**.


GOVERNMENT OF THE DISTRICT OF COLUMBIA

Personal Information

First Name *

Middle Name

Last Name *

Email Address *

Confirm Email Address *

Additional Contact (if different from resident)

Phone Number *

Consent for texting

☒ No ☐ Yes

Do you prefer to be contacted by phone?

☒ No ☐ Yes

Gender *

Race *

If other race, please specify

Please describe your ethnicity *

Please provide your date of birth

Month *

Day *

Year *

Previous

Next

9. If you have forgotten to complete a required question or a question wasn't answered correctly, a message will appear and provide you instructions on how to fix it. Make the corrections, and then click **Next**.



The screenshot shows a web interface for DC Health. At the top is a light blue header with the DC Health logo and the text "GOVERNMENT OF THE DISTRICT OF COLUMBIA". Below the header is a large white area. In the center of this area is a pink rectangular box containing an error message. The message starts with an information icon and the text "The form could not be submitted for the following reasons:". Below this, there are four lines of text, each preceded by a blue checkmark icon: "Address (search for and select your address here) is a required field.", "Gender is a required field.", "Race is a required field.", and "Insurance is a required field.".

DC | HEALTH
GOVERNMENT OF THE DISTRICT OF COLUMBIA

i The form could not be submitted for the following reasons:

- Address (search for and select your address here) is a required field.
- Gender is a required field.
- Race is a required field.
- Insurance is a required field.

[Previous](#)

[Next](#)

10. You will be prompted to verify the information. Check the form to make sure everything is correct.

- If the information is not correct, select **Previous** to return to your form and make changes.
- If the information is correct, select the **I verify that the above information is accurate** check box, and then select **Next**.

By clicking "next" you agree that the above information is accurate. You also agree to information, you authorize us to share your personally identifiable information with our vaccination program. A copy of our privacy policy can be found by clicking [here](#).

☒ I verify that the above information is accurate *

[Previous](#) [Next](#)

11. Find a location. On this page, choose a vaccination location that works for you by clicking **Book Appointment** next to the desired location.

You can also use the map to see locations in proximity to your residence. The numbers correlate to the list of locations on the right side of the screen.

The screenshot shows the DC Health website interface for finding COVID-19 vaccination locations. At the top, the DC Health logo is visible with the tagline "accelerator of the impact of science". A "Sign in" link is in the top right corner. A warning box states: "Do not use the browser back button. If centers are not available, please sign up to be alerted when more appointments are available. Covid-19 vaccinations will be made available in phases to ensure those populations most at risk are prioritized. Based upon your current status, you are currently eligible to schedule your appointment for vaccination. Please select a COVID Vaccination Location by clicking on the name from the list below."

Below the warning box, the user is greeted with "Welcome Lisa Testing". A search bar shows "1400 7th St NW, Washington" with a "Search" button. To the left is a map of Washington, D.C., with a red arrow pointing to a location in the center. To the right is a list of three vaccination locations, each with a "Book Appointment" and "Get Directions" button. A red arrow points to the "Book Appointment" button for the second location.

Location	Address	Distance
1. Giant Food #2576	1400 7th St NW Washington, DC 20001	0 miles
2. Bread for the City - Medical Clinic	1525 7th St NW Washington, DC 20001	0.1 miles
3. Community of Hope - Conway Health and Resource Center	4 Atlantic St SW Washington, DC 20032	5.4 miles

12. Click **Get Directions** for a location to generate a map containing directions from where you are to the appointment address.

DC HEALTH
OFFICE OF THE CHIEF TECHNOLOGY OFFICER

Do not use the browser back button.
If centers are not available, please sign up to be alerted when more appointments are available.
Covid-19 vaccinations will be made available in phases to ensure those populations most at risk are prioritized. Based upon your current status, you are currently eligible to schedule your appointment for vaccination. Please select a COVID Vaccination Location by clicking on the name from the list below.

Welcome Lisa Testing

Search for location near: 1400 7th St NW, Washington within 25 miles Search

1. Giant Food #2376 0 miles
1400 7th St NW Washington, DC 20001
Book Appointment
Get Directions

2. Bread for the City - Medical Clinic 0.1 miles
1525 7th St NW Washington, DC 20001
Book Appointment
Get Directions

3. Community of Hope - Conway Health and Resource Center 5.4 miles
4 Atlantic St SW Washington, DC 20032
Book Appointment
Get Directions

Check your address and click **Get Directions**.

Get Directions

From: 2601 16th St NW, Washington, District of Columbia

To: 38.9259,-77.03533

Get Directions

7. Bread for the City - Medical Clinic 1.2 miles
1525 7th St NW Washington, DC 20001

Get Directions

10 min	Light traffic Via 16th St NW, U St NW	1.8 mi
11	Light traffic	1.8 mi

13. Once you select your location, you will see a list of available appointments. Click **Select** to schedule your appointment.

DC HEALTH
DISTRICT OF COLUMBIA

Sign in

If appointments are NOT available, please use the **Change Location** button to select other centers. If no other centers are available, please sign up to be alerted when more appointments are available.

Please note, the time displayed below is based on your local time zone if you are currently outside of Washington DC area (examples may include assisting a family member register for a vaccine.) Your email confirmation will include the time as Washington DC local time. Please verify your appointment time if you are utilizing this system outside of the DC area.

Date Range

From: 03/01/2021 To: 03/31/2021

Apply Change Location

Location	Start Time ↑	End Time	Select
Bread for the City - Medical Clinic	03-02-2021 04:00 AM	03-02-2021 05:00 AM	Select
Bread for the City - Medical Clinic	03-02-2021 05:00 AM	03-02-2021 06:00 AM	Select
Bread for the City - Medical Clinic	03-02-2021 06:00 AM	03-02-2021 07:00 AM	Select
Bread for the City - Medical Clinic	03-02-2021 07:00 AM	03-02-2021 08:00 AM	Select
Bread for the City - Medical Clinic	03-02-2021 08:00 AM	03-02-2021 09:00 AM	Select
Bread for the City - Medical Clinic	03-02-2021 09:00 AM	03-02-2021 10:00 AM	Select
Bread for the City - Medical Clinic	03-02-2021 10:00 AM	03-02-2021 11:00 AM	Select
Bread for the City - Medical Clinic	03-02-2021 11:00 AM	03-02-2021 12:00 PM	Select
Bread for the City - Medical Clinic	03-02-2021 12:00 PM	03-02-2021 01:00 PM	Select
Bread for the City - Medical Clinic	03-03-2021 04:00 AM	03-03-2021 05:00 AM	Select

Showing 1 to 10 of 30 entries

1 2 3 4



If there are no appointments available or you want to book at a different location, **do not** click the back button on your browser. Instead, click the **Change Location** to select another one.

14. On the next page, a message will appear stating that your booking is confirmed along with your appointment details, such as your name, ID, start time, vaccine location, address, and QR code.



Email Confirmation

You will also receive an email confirmation with your appointment details.

The subject of the email is: **COVID Vaccine Notification - Booking Confirmation**. Be sure to check your SPAM or JUNK folder. After 24 hours, if you are unable to find the email, please email vaccinatedc@dc.gov for assistance.

From: NO-REPLY-VRAS <no-reply-vras@dc.gov>
Date: Wednesday, January 27, 2021 at 5:50 PM
To: Sylvia Murph <ldyfm@email.com>
Subject: COVID Vaccine Notification - Booking Confirmation

Hello Sylvia,

You have been approved to receive a COVID-19 Vaccine. Please bring the below confirmation code and/or QR code with you (on your phone or printed) and report to the vaccine center.

Scheduling Confirmation:

Name: Sylvia Murph
Email: ldyfm@email.com
Appointment ID: 62399-V027F
Vaccination Location: Bread for the City – Medical Clinic
1525 7th St NW
Washington, DC 20001
Start Time: 1/28/2021 5:00 PM EST
End Time: 1/28/2021 6:00 PM EST

Please be prepared to provide verification of your work setting at the time of your vaccine appointment. This can include an ID badge, letter or email from a supervisor, or other methods. The provider who administered your first dose is responsible for scheduling your second dose. If you have any issues scheduling your second doses, please [click here](#) for contact information for your provider. All other questions may be directed to vaccinatedc@dc.gov.

You can cancel your booking by clicking on this [link](#)

Cancelling Your Appointment

1. If you need to cancel your appointment, open your confirmation email for the appointment and select the link at the bottom of the email.

From: NO-REPLY-VRAS <no-reply-vras@dc.gov>
Date: Wednesday, January 27, 2021 at 5:50 PM
To: Sylvia Murph <ldyfm@email.com>
Subject: COVID Vaccine Notification - Booking Confirmation

Hello Sylvia,

You have been approved to receive a COVID-19 Vaccine. Please bring the below confirmation code and/or QR code with you (on your phone or printed) and report to the vaccine center.

Scheduling Confirmation:

Name: Sylvia Murph
Email: ldyfm@email.com
Appointment ID: 62399-V0Z7F
Vaccination Location: Bread for the City – Medical Clinic
1525 7th St NW
Washington, DC 20001
Start Time: 1/28/2021 5:00 PM EST
End Time: 1/28/2021 6:00 PM EST

Please be prepared to provide verification of your work setting at the time of your vaccine appointment. This can include an ID badge, letter or email from a supervisor, or other methods. The provider who administered your first dose is responsible for scheduling your second dose. If you have any issues scheduling your second doses, please [click here](#) for contact information for your provider. All other questions may be directed to vaccinatedc@dc.gov.

You can cancel your booking by clicking on this [link](#)

2. Confirm your date of birth, and then click **Next** to continue.

DC | HEALTH

GOVERNMENT OF THE DISTRICT OF COLUMBIA

Please confirm your date of birth

Month *

Day *

Year *

Next

Further Assistance

If you have any difficulty or cannot find your confirmation email, please email vaccinatedc@dc.gov for support.

You may also call the District's call center at 855-363-0333, for assistance with vaccine registration.

To receive alerts via email or text for future announcements or when more appointments become available, go to vaccinate.dc.gov.

Appendix

Error messages

When the system needs to queue visitors in a waiting room to manage high volume, users will see this message. Given the high demand and limited number of appointments, many users will unfortunately be unable to schedule an appointment during that day's release. Users should wait until they 1) Get access to schedule an appointment, or 2) Receive a message there are no longer appointments available.

[Text will be changing]

Coming

The system is set by default to show appointments in two week increments to align with how the DC Department of Health typically releases appointments. However, in some cases an additional few days or weeks may be added beyond this two week period. Users should expand their date search using the calendar functions below.

Note: We are working to show all available appointments in future updates to eliminate this extra step in the future.

DC HEALTH

Division of the Department of Health

Sign in

If appointments are NOT available, please use the **Change Location** button to select other centers. If no other centers are available, please sign up to [be alerted when more appointments are available](#).

Please note, the time displayed below is based on your local time zone if you are currently outside of Washington DC area (examples may include assisting a family member register for a vaccine.) Your email confirmation will include the time as Washington DC local time. Please verify your appointment time if you are utilizing this system outside of the DC area.

Date Range


From: 03/31/2021

To: 04/08/2021

Apply Change Location

Sorry, there are no slots available

Please choose another location



With the high volume of people scheduling at the same time, an available appointment might be booked seconds ahead of you. You should click the “Try Again” button and look for another available appointment.

Text will be changing

